POWER SIP FORM

Debit Mandate Form (Auto Debit/NACH)

Please read Product Labelling available on the Front Inside Cover Page and instructions before filling this form (all points marked * are mandatory)

Edelweiss Ideas create, values protect | MUTUAL FUND

APPLICATION NO.

Sponsor: Edelweiss Financial Services Limited | **Trustee Company:** Edelweiss Trusteeship Company Limited | **Investment Manager:** Edelweiss Asset Management Limited
Edelweiss Mutual Fund, 801, 802 & 803, 8th Floor, Windsor, Off C.S.T. Road, Kalina, Santacruz (E), Mumbai 400098, Maharashtra.

☐ New Registration ☐ Cancellation ☐ Change in Bank details

1 DISTRIBUTOR INFORMATION

Distributor Code	Sub-Broker Code	Sub-Broker Code	Employee Unique	E-Code	RIA CODE^
ARN -	ARN -	INTERNAL CODE	IDENTIFICATION NO. (EUIN)		ONLY FOR DIRECT INVESTMENT

***Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker".**

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. For Direct investments, please mention 'Direct' in the column 'Name & Distributor Code'

^I/We, have invested in the below mentioned scheme of Edelweiss Mutual Fund under the Direct Plan. I/We hereby give my/our consent to share/provide the transaction data feed / portfolio holdings / NAV etc. in respect of this particular transaction, to the SEBI Registered Investment Advisor (RIA) bearing the above mentioned registration number.

SIGNATURE (s)

SOLE / FIRST APPLICANT	SECOND APPLICANT	THIRD APPLICANT

All sections to be filled in English and in BLOCK LETTERS. Use this form If you are making a one time investment. For SIP investment use the separate SIP Form. All columns marked * are mandatory.

2 APPLICANT'S PERSONAL DETAILS* (New Investors are required to fill this form) Folio No. (For Existing Unit Holders)

Sole / 1st Unit Holder

PAN | Date of Birth D D M M Y Y Y Y | Mobile No.

3 INVESTMENT DETAILS Choice of Plan [Please ✓]

Trigger Condition - Fall in	Scheme Name (✓ any one)
Nifty Smallcap 250 TR Index (Minimum amount is ₹1,000, Maximum amount is ₹1,99,000) ☐ 0.50% Amount ☐ 1.00% Amount ☐ 1.50% Amount ☐ 2.00% Amount ☐ 2.50% Amount ☐ 3.00% Amount	Edelweiss Small Cap Fund Plan _____ Option _____
OR	
Nifty Free Float Midcap 100 (Minimum amount is ₹1,000, Maximum amount is ₹1,99,000) ☐ 0.50% Amount ☐ 1.00% Amount ☐ 1.50% Amount ☐ 2.00% Amount ☐ 2.50% Amount ☐ 3.00% Amount	Edelweiss Mid Cap Fund Plan _____ Option _____
OR	
Nifty - 50 Index fall (Minimum amount is ₹1,000, Maximum amount is ₹1,99,000) ☐ 0.50% Amount ☐ 1.00% Amount ☐ 1.50% Amount ☐ 2.00% Amount ☐ 2.50% Amount ☐ 3.00% Amount	☐ Edelweiss Large Cap Fund ☐ Edelweiss Aggressive Hybrid Fund ☐ Edelweiss Balanced Advantage Fund ☐ Edelweiss Equity Savings Fund ☐ Edelweiss Multi-Cap Fund ☐ Edelweiss Large & Mid Cap Fund Plan_____ Option_____ ☐ Edelweiss Long Term Equity Fund (Tax Savings) Plan_____ Option_____

For Dividend Sweep Option - Dividend Sweep to Scheme_____ Plan_____ Option_____

Note:- The below details are optional and is applicable for the investors who have submitted investment cheque along with Power SIP mandate form.

Cheque No. _____ Cheque Amount ₹_____ Bank Name _____ Bank A/c. No. _____

4 MAXIMUM NUMBER OF INSTALLMENT PER MONTH

☐ 1 ☐ 3 ☐ 5 ☐ 7 ☐ ANY (Default)

5 POWER SIP INSTALLMENT PERIOD*

SIP Period : From Date D D M M Y Y Y Y or Perpetual (99 years) (Default) ☐ To Date D D M M Y Y Y Y

6 INVESTMENT THROUGH OTM ☐ Existing OTM ☐ New Register

For registration through OTM, please provide UMRN No.

Bank Name _____ Bank Account No. _____

Note: In case OTM not registered please fill up a separate OTM form.

7 DECLARATION AND SIGNATURE (To be signed by ALL UNIT HOLDERS if mode of holding is 'joint')* DATE : ____ /____ /_____ PLACE : _____

I / We declare that the particulars furnished here are correct. I / We authorise Edelweiss Mutual Fund acting through its service providers to debit my / our bank account towards payment of SIP instalments through an Electronic Debit arrangement. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/we would not hold the user institution responsible. I/We will also inform Edelweiss Mutual Fund about any changes in my bank account. This is to inform you that I/We have registered for making payment towards my investments in EDELWEISS MUTUAL FUND by debit to my /our account directly or through NACH. I/We hereby authorize to honour such payments and have signed and endorsed the Mandate Form. Further, I authorize my representative (the bearer of this request) to get the above Mandate verified. Mandate verification charges, if any, may be charged to my/our account. I also hereby agree to read the respective SID and SAI of the mutual fund before investing in any scheme of Edelweiss Mutual Fund using this facility.

SIGNATURE (s)

SOLE / FIRST APPLICANT	SECOND APPLICANT	THIRD APPLICANT

TERMS AND CONDITIONS

1. Under this facility, investors can opt for investing in the any of the "Eligible Schemes" of the Fund as and when there is a fall in Nifty 50 Index/ Nifty Free Float Midcap 100 Index by percentage selected by the investor from amongst 0.50%, 1.00%, 1.50%, 2.00%, 2.50% & 3.00% from the previous business day's closure.
2. First time investors in the Fund, shall be required to submit the Power SIP Debit Mandate Form along with Common Application Form and a investment cheque.

   Under this facility investors have an option to choose only one scheme for multiple index level fall i.e 0.50%, 1.00%, 1.50%, 2.00%, 2.50% & 3.00%, along with specified amount for each Index fall as a trigger. However at any point in time the highest % of fall shall be considered for the purpose of investment under Scheme. For eg. If Investor / Unitholders have opted for specified index level fall of 0.5%, 1% and 2% for trigger of ₹ 1000, 2000 and 3000 respectively and if that specified index fall by 2% or more, then the highest level of index fall would be considered for investment under the Target Scheme (i.e. 2% and ₹ 3000).
3. Existing investors have the option to submit the Power SIP form WITH or WITHOUT first investment cheque. Investors opting for Power SIP WITHOUT cheque are compulsorily required to submit the form along with cancelled cheque copy. Please refer the last section of Point No 3.
4. Power SIP form allows selection of only one index per application. In case you wish to select multiple index, use separate Power SIP forms.
5. Investors who have already submitted a One Time Mandate (OTM) form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account. However, if such investors who wish to add a new bank account towards OTM facility may fill the form.
6. Any new OTM mandate registration with existing OTM mandate bank details will overwrite the existing OTM registered in the system.
7. Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed OTM form with their name mentioned.
8. The Distributor ARN for a 'Power' SIP transaction shall be the same as registered against the folio in which the transaction is being done. In case a folio has multiple brokers registered, then the transaction under this facility shall be made under the Distributor ARN of the last transaction in the folio.
9. Registration under the facility shall be completed within 30 days from the date of submission of the Power SIP Debit Mandate Form and a confirmation of successful registration shall be sent to the investor via SMS and email.
10. The installment date for investment under this facility shall be determined based on the trigger being activated, post the registration date.
11. Post successful registration of the mandate, in the event of the trigger criteria selected by the investor being met, instructions for debiting the 'Power' SIP Installment as opted by the investor would be sent to the investors bankers. An SMS/email will be triggered to the investor about the same.
12. Investor has the option to choose either of the Nifty 50 Index/Nifty Free Float Midcap 100 Index fall. However, the investment amount of each scheme should meet the minimum additional purchase criteria and also the cumulative amount in all schemes cannot be more than the maximum amount per debit set by the investors in the mandate.
13. An Investor will not hold Edelweiss Mutual Fund, its registrars and / or service providers responsible if a transaction is delayed or not efiected, or the investor bank account is debited in advance or after the specific Power SIP date because of the various clearing cycles of RBI's Electronic Clearing Facility (ECS). Edelweiss Mutual Fund, its registrars and other service providers shall not be held responsible or liable for damages / compensation / loss incurred by the investor as a result of using this facility.
14. The default Index for the purpose of this facility shall be Nifty 50 Index, the default percentage for the fall in Index/Indices,as the case may be, shall be 1%, the default period shall be perpetual and the default scheme shall be Edelweiss Large Cap Fund.
15. Requests for discontinuation of the facility or any change options under the facility shall be processed subject to an advance notice of 10 business days. In the interim if the trigger criteria is satisfied, the AMC reserves the right to debit the investors bank account.
16. The Power SIP installment amount needs to be the equal to or greater than the additional purchase amount of the respective schemes.

Schemes Name	Additional Purchase ₹	Investment in multiples of ₹
Edelweiss Large Cap Fund	1,000.00	1
Edelweiss Aggressive Hybrid Fund	1,000.00	1
Edelweiss Balanced Advantage Fund	1,000.00	1
Edelweiss Mid Cap Fund	1,000.00	1
Edelweiss Equity Savings Fund	1,000.00	1
Edelweiss Long Term Equity Fund (Tax Savings)	500.00	500.00
Edelweiss Multi-Cap Fund	1,000.00	1
Edelweiss Large & Mid Cap Fund	1,000.00	1
Edelweiss Small Cap Fund	1,000.00	1

17. Provisions of the Applicable NAV and cut-ofi me as specified in the Scheme Information Document (SID) of the Selected Eligible Scheme shall be applicable.

ONE TIME BANK MANDATE FORM

Please read Product Labelling available on the Front Inside Cover Page and instructions before filling this form (all points marked * are mandatory)

Edelweiss Ideas create, values protect | MUTUAL FUND

APPLICATION NO.

☐ For Registration ☐ For Modification

1 DISTRIBUTOR INFORMATION

Distributor ARN Code	Sub-Broker ARN Code	Sub-Broker Code	Employee Unique	RIA CODE
ARN -	ARN -	INTERNAL CODE	IDENTIFICATION NO. (EUIN)	ONLY FOR DIRECT INVESTMENT

***Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker".**

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. For Direct investments, please mention 'Direct' in the column 'Name & Distributor Code'

SIGNATURE (s)

SOLE / FIRST APPLICANT	SECOND APPLICANT	THIRD APPLICANT

All sections to be filled in English and in BLOCK LETTERS. All columns marked * are mandatory.

2 UNITHOLDER INFORMATION

Folio No. (For Existing Unit Holders)

Sole / 1st Unit Holder

PAN | Date of Birth (D D M M Y Y Y Y) | Mobile No.

CKYC No.

3 BANK DETAILS (Please attached a cancel cheque in original for the below mentioned bank account, with this application form)

Account Holder's Name

Name of the Bank

Branch | Account No.

Account Type: ☐ Current ☐ Savings ☐ NRO ☐ NRE ☐ Others _____ | 9 digit MICR Code

4 EXISTING UMRN DETAILS (For Modification)

Bank Account Number

Bank Name

UMRN

Modification will be applicable for existing SIP registered under UMRN details mentioned in point (4). Future SIP debit will be initiated from new bank account as mentioned by you in point (3) post successful registration

---

Edelweiss Ideas create, values protect | MUTUAL FUND

ONE TIME BANK MANDATE

(NACH/Direct Debit Mandate Form)

(applicable for Lumpsum Additional Purchase as well as SIP Registrations)

Tick (✓)
Create (✓)
Modify(×)
Cancel (×)

UMRN (For Office use only) Date: (D D M M Y Y Y Y)

Sponsor Bank Code | Utility Code

I/We hereby authorize EDELWEISS MUTUAL FUND To Debit (✓) SB / CA / CC SB NRE / SB NRO / Other

Bank A/c. Number

With Bank | IFSC | or MICR

An Amount of Rupees ₹

FREQUENCY ☒ Monthly ☒ Quarterly ☒ Half Yearly ☒ Yearly ☑ As & when presented **DEBIT TYPE** ☒ ~~Fixed Amount~~ ☑ Maximum Amount

Reference /Folio No. | Phone No.

Scheme Name ALL SCHEMES OF EDELWEISS MUTUAL FUND | Email ID

I Agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my accounts as per latest schedule of charges of the bank.

PERIOD (DDMMYYYY)

From

To

Or Until Cancelled

Signature Primary Account holder	Signature Account holder	Signature Account holder
1. Name as in Bank Records	2. Name as in Bank Records	3. Name as in Bank Records

This is to confirm that the declaration has been carefully read, understood & made by me / us. I am authorizing the User entity / Corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / corporate or the bank where I have authorized debit

Instructions

1. Investors who have already submitted a One Time Mandate (OTM) form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account. However, such investors who wish to add a new bank account towards OTM facility may fill the form.
2. Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed form with their name mentioned.
3. Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form differs from the ones as already existing in the folio, the details provided on the mandate will be updated in the folio. All future communication whatsoever would be, thereafter sent to the updated mobile number and email id.
4. Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/bank account details are subject to third party verification.
5. Investors are deemed to have read and understood the terms and conditions of OTM Facility, SIP registration through OTM facility, the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of Edelweiss Mutual Fund.
6. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format.
7. Utility Code of the Service Provider will be mentioned by Edelweiss Mutual Fund.
8. Tick on the respective option to select your choice of action and instruction.
9. The numeric data like Bank account number, Investors account number should be left padded with zeroes.
10. Please mention the Name of Bank and Branch, IFSC/ MICR Code and also provide an original cancelled copy of the cheque of the same bank account registered in One Time Mandate.
11. Amount payable for service or maximum amount per transaction that could be processed in words. The amount in figures should be same as the amount mentioned in words, in case of ambiguity the mandate will be rejected.
12. If the investor wishes to opt for more than one dates/frequencies for debit from the bank account as in case of Systematic Investment Plan, it is advisable to select - "As & when presented".
13. There is no maximum duration for enrolment.
    An investor has an option to choose the 'End Date' of the SIP by filling the date or the Default Date i.e. December 2099 will be the end date.
14. Please affix the Names of customers/and signatures as well as seal of Company (where required) and sign the undertaking.
15. Investors enrolling for Daily SIP should select "As & when presented" as payment frequency in the OTM.

Declaration: 1/We hereby declare that the particulars provided in this mandate are correct and complete and hereby agree to participate in the NACH/ECS/Direct Debit/Standing Instructions (SI) and make payments through the NACH platform according to the terms and conditions thereof. I/We further hereby agree and acknowledge that I/we will not hold the AMC and/or responsible for any delay and/or failure in debiting my bank account for reasons not attributable to the negligence and/or misconduct on the part of the AMC I/We hereby declare and confirm that, irrespective of my/our registration of the above mobile number in the 'DO NOT DISTURB (DND)', 'or in any similar register maintained under applicable laws, now or subsequent to the date hereof, I/We hereby consent to the Bank communicating with me/us in any manner whatsoever on the said mobile number with respect to the transactions carried out in my/our afore mentioned bank account(s). I/We hereby agree to abide by the terms and conditions that may be intimated to me/us by the AMC/Bank with respect to the NACH/ECS/Direct Debit/SI from time to time.

Authorisation to Bank: This is to inform that I/We have registered for ECS I NACH (Debit Clearing)/Direct Debit/Sl facility and that the payment towards my/our investments in the Schemes of Edelweiss Mutual Fund shall be made from my/our above mentioned bank account with your Bank. I/We hereby authorize the representatives of Edelweiss Asset Management Company Limited, Investment Manager to Edelweiss Mutual Fund carrying this mandate form to get it verified and executed. I/We authorize the Bank to debit my/our above-mentioned bank account for any charges towards mandate verification, registration, transactions, returns, etc, as applicable for my/our participation in NACH/ECS/Direct Debit/SI.

Mutual Fund Investment are subject to market risks, read all scheme related documents carefully.